OHIO DEPARTM OF PUBLIC SAI SAPETY - SERVICE - PRO	TRAFFIC	CRAS		LOCAL REPORT NUMBER *									
☐ PHOTOS TAKEN	OH-2	OH-3	2   0   2   5	2 0 2 5 1 4 1 1 1									
SECONDARY CRASH	OH-1P Private Property	OTHER	REPORTING AGENCY		LITE 0	HIT/SKIP 1 - Solved 2 - Unsolved	NIIMRED AE IINITS	0 1 98 - ANIMAL 99 - UNKNOWN					
COUNTY* LOCALIT	TY*	LOCATION: CITY, VI		CRASH DATE/TIME * CRASH SEVERITY									
			LD HTS					2 5   0 1 3 2	5 1- FATAL 2- SERIOUS INJURY SUSPECTED				
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH 3 - EAST 4 - WEST	GARFI	ROAD NAME ELD	ROAD TYPE		3   1   2   4   0	3 - MINOR INJURY SUSPECTED 4 - INJURY POSSIBLE				
ROUTE TYPE	ROUTE NUMBER	PREFIX	1 - NORTH 2 - SOUTH	REFERE	NCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPI	E LONGITUDE DECI	MAL DEGREES	5 - PROPERTY DAMAGE ONLY				
REFERENCE			3 - EAST 4 - WEST	8 1 6 2	2   8   7   5   4								
1 - INTERSECTION 2 - MILE POST 3 - HOUSE #	DIRECTION  DIRECTION  1-NORTH  2-SOUTH  3-EAST 4-WEST  DISTANCE  HANT OF MERCHING  1-Miles	US - FED SR - STA CR - NUN	POLITE TYPE ERSTATE ROUTE (TP) DERAL US ROUTE ATE ROUTE MBERED COUNTY ROU MBERED TOWNSHIP UTE		NA TYPE								
1 0 1	2 - Feet 3 - Yards	VIDED											
	CATION OF EIDST HADMEI II		DIRECTION OF TRAVEL	_									
0 6 1-0N ROAL 2-0N SHOLD 4-0N ROAL 4-0N ROAL 5-0N GOR 6-0UTSIDE TRAFFICE 7-0N RAM 8-0FF RAM	ULDER 10 - DRIVEWA AN ACCESS DSIDE 11 - RAILWAY E CROSSIN E 12 - SHARED 1 WAY OR TRAIL P 13 - BIKE LAN	Y/ALLEY  GRADE G USE PATHS S E DTH	1	1 - NOT COLLISION BETWEEN TWO MOTOR VEHICLES IN TRANSPORT 2 - REAR-END 3 - HEAD-ON	4 - REAR-TO-REAR 5 - BACKING 6 - ANGLE 7 - SIDESWIPE, SAME DIREC 8 - SIDESWIPE, OPPOSITE D 9 - OTHER / UNKNOWN		(<4   2 - DIVI (≥4   3 - DIVI 4 - DIVI (AN'	1 - DIVIDED FLUSH MEDIAN (c4 FEET) 2 - DIVIDED FLUSH MEDIAN (c4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN 4 - DIVIDED, DRAISED MEDIAN (ANY TYPE) 9 - OTHER / UNKNOWN					
WORK ZONE RELATED WORKERS PRESENT LAW ENFORCEMENT PRESENT  ACTIVE SCHOOL ZONE	2-3-	WORK ZO LANE CLOSURE LANE SHIFT/CROS WORK ON SHOULD OR MEDIAN INTERMITTENT OR	DER		LOCATION OF CRASH IN 1  1- BEFORE THE 1ST IV WARNING SIGN 2 - ADVANCE WARNING SIGN 3 - TRANSTRION AREA 4 - ACTIVITY AREA 5 - TERMINATION ARE.	ORK ZONE GAREA	CONTOUR  1. STRAIGHT LEVEL 2. STRAIGHT GRADE 3. CURVE LEVEL 4. CURVE GRADE	1 - DRY 2 - WET 3 - SNOW 4 - ICE 5 - SAND, MUD, DIRT,	SURFACE  1 - CONCRETE 2 - BLACKTOP, BITUMINOUS, ASPHALT 3 - BRICK/BLOCK				
1 - DAYLIGHT 2 - DAWN/DUSK 3 - DARK - LIGHT 4 - DARK - ROAD	TED ROADWAY WAY NOT LIGHTED OWN ROADWAY LIGHTING	1_1	1 - CLEAR 2 - CLOUD 3 - FOG, S 4 - RAIN 5 - SLEET,	MOG, SMOKE	6 - SNOW 7 - SEVERE CROSSWINDS 8 - BLOWING SAND, SOIL, DIRT, S 9 - FREEZING RAIN OF FREEZING 99 - OTHER / UNKNOWN		9 - OTHER JUNKNOWN	OIL, GRAVEL 6-WATER (STANDING, MOVING) 7- SLUSH 9- OTHER UNKNOWN	4 - SLAG, GRAVEL, STONE 5 - DIRT 9 - OTHER JUNKNOWN				
NARRATIVE									Indicate the north direction with				
UNIT 1 WAS E 8133 GARFIE							<u> </u>		an "N" on the compass diagram.				
UNIT 1 FAILEI													
THE DOOR T	HE STRIKE TI	HE. SIDE	E OF THE	RESIDE	ENCE								
LISTED ABOV	/E												
									v = e =				
CRASH REPORTE	D DATE/TIME		DISPATCH DATE	E/TIME	ARRIVAL D.    0   6   0   7   2   0   2		1	FARED DATE/TIME	REPORT TAKEN BY POLICE AGENCY				
10 6 0 7 2 0 2	5   0   1   3   2   OTHER INVESTIGATION	0 6 0	8     0 6 0 7 2 0	2 5   0 2 2 9	MOTORIST								
CLOSED TIME MINUTES A. Pietraszkiewicz T. Baon								OF NUMBERS	SUPPLEMENT (CORRECTION or ADDITION				
0	0   1   5     7   0						CHECKED BY OFFICER'S BAD	CHECKED BY OFFICER 3 DADGE NUMBER					

	OH OF SAPE	TIO DEPARTMENT PUBLIC SAFETY TY - BENVICE - PROTECTION  UNIT		LOCAL REPORT NUMBER  2   0   2   5   1   4   1   1									
	UNIT#	OWNER NAME: LAST, FIRST, MIDDLE HERTZ	〔□ Sam	e As Driver)	OWNER P	PHONE: INCLUDE AREA CODE (	Same As Driver)	DAMAGE  DAMAGE SCALE					
OWNER	OWNER ADDRE	SS: STREET, CITY, STATE, ZIP	(☐ Same As Dr	iver)	AND	OU		1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN					
0		RRIER: NAME, ADDRESS, CITY, STATE, ZIP	ODAVE	CLEVEL		OH  CIAL CARRIER PHONE: INCLUDE AR	REA CODE		9 - UNKNOWN				
	1007475	T	l ve	WIND E IDENTIFICATION "	Ш	I VEND EVEN		DAMAGED AREA(S) INDICATE ALL THAT APPLY					
	License plate # VEHICLE IDENTIFICATION #   UCENSE PLATE #   VEHICLE IDENTIFICATION #   3 N 1 C N 8 E V 3 S L 8 2 6					VEHICLE YEAR 2 5	VEHICLE MAKE Nissan	11 12	11 12				
		JRANCE RIFIED INSURANCE COMPANY	,	INSURANCE POLICY#	VEHICLE COLOR VEHICLE MODEL  BLK VERSA			10 12 1	2 10 12 1				
	☐ COMMER	TYPE OF USE	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPANY NAME			9 3	3 9 9 3 3				
	INTERLO		# OCCUPANTS	VEHICLE WEIGHT GVWR/GCWR  1 - ≤10K LBS.	<u> </u>	HAZARDOUS MA	ATERIAL CLASS# PLACARD ID#	7 6 5	4 8 7 5 4				
	EQUIPPE	ED	0 1	2 - 10,001 - 26K LBS. 3 - >26K LBS.	10 1710 //	PLACARD	DEDECTRIANIONATED	7 6 5	11 12 1				
	⊥0 ⊥1 ⊥	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE	12 - GOLF CART 13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK	18 - LIMO (LIVERY VEHICLE)         23 - PEDESTRIANISKATER           19 - BUS (16+ PASSENGERS)         24 - WHEELCHAIR (ANY TYPE)           20 - OTHER VEHICLE         25 - OTHER NON- MOTORIST           21 - HEAVY EQUIPMENT         26 - BICYCLE				10 2				
	UNIT TYPE	4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL	L WITH RIDER OR 27	- TRAIN - UNKNOWN OR HIT/SKIP	7 8 7					
VEHICLE	. 0		(ATV / UTV)					11 12 1	7 6 5 11 12 1				
VEH		# OF TRAILING UNITS						10 12	2 10 11 1 2				
	. 2 .	WAS VEHICLE OPERATING IN AUTONO WHEN CRASH OCCURED?	AUTONOMOUS	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	AUT 4 - HIGH	OMATION H AUTOMATION	- UNKNOWN	9 9 3	3 9 9 3				
		1-YES 2-NO 9-OTHER/UNKNO	WN MODE LEVEL  6 - BUS - CHARTER/TOUR	11 - FIRE	5 - FULI	L AUTOMATION	1 - MAIL CARRIER	8 7 6	7.				
		2 - TAXI 3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	7 - BUS - INTERCITY 12 - MILITARY		17 - MO 18 - SN( 19 - TO)	WING 99 OW REMOVAL WING	9 - OTHER /UNKNOWN	7 6	7 6 5				
	FUNCTION	5 - BUS-TRANSIT/COMMUTER	10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT		20 - SAFETY SERVICE PATROL		17	12 12 12					
	0 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX		RGO TANK 13 - AT BED 14 -	- CONCRETE MIXER - AUTO TRANSPORTER - GARBAGE/REFUSE	. R. M. R.					
	CARGO BODY	<b>'</b>		7 - GRAIN/CHIPS/GRAVEL	11 - DU		- OTHER / UNKNOWN	,609,					
		1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT DEFECTIVE	10 - DIS	TOR TROUBLE 99 - SABLED FROM PRIOR CIDENT	- OTHER / UNKNOWN	ь	6 6 6				
	NON-MOTORIST	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	10 - DRIVEWAY ACCESS		P - FIRST RESPONDER AT INCIDENT SCENE D - OTHER / UNKNOWN	- NO DAMAGE [0] - TOP [13]	☐ - UNDERCARRIAGE [14] ☐ - ALL AREAS [15]				
	LOCATION AT IMPACT	2 - INTERSECTION - UNMARKED CROSSWALK	5 - TRAVEL LANE-OTHER LOCATION	OBETHER	TRAILS		<del>-</del>	NIT NOT AT SCENE [16]					
	2	1-NON-CONTACT 2-NON-COLLISION 0 2	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - EN	TERING OR CROSSING	8 - APPROACHING OR LEAVING VEHICLE 9 - STANDING	ı	NITIAL POINT OF CONTACT				
		3 - STRIKING 4 - STRUCK PRE-CRASH 5 - BOTH STRIKING	3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	10 - PARKED 11 - SLOWING OR STOPPED	15 - WA	LKING, RUNNING, 2 GGING, PLAYING	0 - OTHER NON-MOTORIST 11 - STANDING OUTSIDE DISABLED VEHICLE	0 9 0 - NO DAMAGI					
		& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN TRAFFIC 12 - DRIVERLESS	16 - WO 17 - PUS	RKING 9: SHING VEHICLE	9 - OTHER / UNKNOWN	DIAGRAN 13 - TOP	99 - UNKNOWN				
		4 100			A DESCRIPTION AND A DESCRIPTION				TRAFFIC				
		1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE/ACDA 0 IMPROPER LANE	13 - IMPROPER START FROM A PARKED POSITION 14 - STOPPED OR PARKED	18 - OPE EQU	ERATING DEFECTIVE 22 UIPMENT 23	- LYING IN ROADWAY 2 - NOT DISCERNABLE 3 - OPENING DOOR INTO	TRAFFICWAY FLOW	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN				
	112	4 - RAN STOP SIGN 9 - IMPROPER LANE ILLEGALLY 5 - INNSAFE SPEED CHANGING 15 - SWERVING TO AVOID 6 - IMPROPER TURN 11 - DROVE OFF ROAD 16 - WRONG WAY		15 - SWERVING TO AVOID	19 - LOAD SHIFTING/ ROADWAY FALLING(SPILLING 99 - OTHER IMPROPER 20 - IMPROPER CROSSING ACTION			1 - ONE-WAY 2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL				
	CONTRIBUTING CIRCUMSTANCES	TING 12 - IMPROPER BACKING			7,0100			# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING				
T(S)	OF OUT NOT	FUENTO							1 - NOT INVOLVED 2 - INVOLVED - ACTIVE CROSSING				
EVENT(S)		OF EVENTS  EVENTS  EVENTS			16 - RAILWAY VEHICLE 22 - WORK ZONE			0	3 - INVOLVED - PASSIVE CROSSING				
	<sup>1</sup> 5 2	1 - OVERTURNINGLOVER   6 - EQUIPMENT FAILURE		OPPOSITE DIRECTION OF	17 - ANIMAL - FARM 18 - ANIMAL - DEER		MAINTENANCE EQUIPMENT S-STRUCK BY FALLING,	L L	INIT / NON-MOTORIST DIRECTION				
		4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOT	MAL - OTHER  TOR VEHICLE IN INSPORT	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR		1 - NORTH 5 - NORTHEAST  2 - SOUTH 6 - NORTHWEST				
			15 - PEDALCYCLE		21 - PARKED MOTOR VEHICLE VEHICLE 24 - OTHER MOVABLE OBJECT			FROM   1   TO	3-EAST 7-SOUTHEAST				
	3			COLLISION WITH FIXED OBJECT		20			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN				
	4, , ,	25 - IMPACT ATTENUATOR / CRASH CUSHION 26 - BRIDGE OVERHEAD	31 - GUARDRAIL END 32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST 39 - LIGHT/LUMINARIES SUPPORT	43 - CUF 44 - DITO 45 - EMB	CH BANKMENT 51	-WORKZONE MAINTENANCE EQUIPMENT - WALL	UNIT SPEED	DETECTED SPEED				
		STRUCTURE 27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	34 - MEDIAN GUARDRAIL BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	46 - FEN 47 - MAIL 48 - TRE	LBOX 53	- BUILDING - TUNNEL - OTHER FIXED OBJECT	,5, , ,	3 1 - STATED/ESTIMATED SPEED				
	5	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	42 - CULVERT		E HYDRANT	- OTHER / UNKNOWN		2 - CALCULATED / EDR				
	6							POSTED SPEED	3 - UNDETERMINED				
	, 1 ,	1						0					
HS	Y8304 OH1U 1/19 [	FIRST HARMFUL EVENT	_ · Mo	OST HARMFUL EVENT					PAGE OF				

OHIO DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
OF PUBLIC SAFETY SAFETY - SERVICE - PROTECTION	MOTORIST / NO	JN-WOTORI	51				_2	0   2   5	<sub>_</sub> 1 <sub>_</sub>	4   1   1				
M UNIT # NAME: LAST, FIRS		2 0 2 5 1 4 1 1												
□ LAMAR JARVIS LAMAR							0   6   1   3   1   9   7   9   4   5     M							
	ORESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
1 0100 0/1111	8133 GARFIELD BLVD UP CLEVEL  NJURIES SAUGENCY (MANE) INJURED TAKEN TO: MEDICAL FACILITY				-, -				SITION	AIR BAG USAGE	EJECTION	TRAPPED		
5 1				USED	0   1	╢□	DOT-COMPLIAN MC HELMET		1	⊢ 1	1	$ \cdot _1$		
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE	CHARGED		FFENSE DESCRIPT				=	CITATION NUMBE	iR	- ] -		
M 0 T				CODE										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT		CONDITION	STATUS	ALCOH TYPE	OL TEST VALUE	STATU		RUG TEST(S) RESU	ILT SELECT UP TO 4		
s 4		<sup>1</sup> 1	ALCOHOL M	IARIJUANA	1	1 <sub> </sub>	1 <sub> </sub>		1	1	1	11 11		
M UNIT# NAME: LAST, FIRS	ST, MIDDLE						DATE OF BIRTH					GENDER		
0 T 0							l		1 1					
R ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
s T														
N TAKEN BY	MS AGENCY (NAME)	INJURED TAKEN TO: MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQUII USED	PMENT		DOT-COMPLIAN	SEATING POS	ITION	AIR BAG USAGE	EJECTION	TRAPPED		
N COLOTATE CONTRACTOR US	THE NUMBER	OFFENSE (	CHARGED	LOCAL OF	FFENSE DESCRIPTI		MC HELMET			CITATION NI IMPE	<u> </u>			
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE	CHARGED	CODE	FFENSE DESCRIPTI	ION	CITATION NUMBER							
O OL CLASS ENDORSEMENT	RESTRICTION SELECT UP TO 3	DRIVER	ALCOHOL / DRUG SUSPECT	TED .	CONDITION		ALCOHO	DL TEST		Di	RUG TEST(S)			
R SELECT UP TO 2		DISTRACTED BY	ALCOHOL MA	ARIJUANA		STATUS	TYPE	VALUE	STATUS			LT SELECT UP TO 4		
s T			OTHER DRUG	L		Ш		•	1		<u> </u>			
M UNIT # NAME: LAST, FIRS	T, MIDDLE							DATE OF BI	RTH		AGE	GENDER		
0							$\Box$				لللل			
R ADDRESS: STREET, CITY, STATE, ZIP							CONTACT	PHONE - INCLUDE AREA CODE	į.					
S T / INJURIES INJURED E	MS AGENCY (NAME)	IN HIDED TAKEN TO MEDI	CAL FACILITY (NAME, CITY)	SAFETY EQUIP	MENT			SEATING POS	LITION T	AIR BAG USAGE	EJECTION	TRAPPED		
N BY	MS AGENCY (NAME)	INJURED TAKEN TO: WIEDIN	DAL PACIEITI (NAME, CITT)	USED			DOT-COMPLIAN		IIION .	AIR BAG USAGE	EJECTION	IRAPPED		
OL STATE OPERATOR LICE	ENSE NUMBER	OFFENSE (	CHARGED	LOCAL O	FFENSE DESCRIPT	TION	mo neemen		$\dashv$	CITATION NUMBE	iR .			
M O				CODE										
O OL CLASS ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT UP TO 3	DRIVER DISTRACTED	ALCOHOL / DRUG SUSPECT	DHOL / DRUG SUSPECTED CONDITION			ALCOHOL TEST				DRUG TEST(S)			
		BY		ARIJUANA	1	STATUS	TYPE	VALUE	STATU	IS TYPE	RESU	ILT SELECT UP TO 4		
			OTHER DRUG											
INJURIES  1 - FATAL	SEATING POSITION  1 - FRONT - LEFT SIDE	AIR BAG 1 - NOT DEPLOYED	1 - CLASS A	CLASS	1 - ALCOHOL I DEVICE	RESTRICTION INTERLOCK	N(S)	1 - NOT DISTRACTED	TRACTION	1 - NON	TEST ST IE GIVEN	TATUS		
2 - SUSPECTED SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOYED FRONT	2 - CLASS B	2 - CLASS B				2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION		2 - TES	2 - TEST REFUSED			
3 - SUSPECTED MINOR INJURY 4 - POSSIBLE INJURY	3 - FRONT - RIGHT SIDE	3 - DEPLOYED SIDE	3 - CLASS C			2 - CDL INTRASTATE ONLY 3 - CORRECTIVE LENSES		DEVICE (TEXTING, TYPING,		3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE				
5 - NO APPARENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	4 - DEPLOYED BOTH FRONT / 5 - NOT APPLICABLE		4 - REGULAR CLASS (OHIO = D) 5 - M / C MOPED ONLY			4 - FARM WAIVER 5 - EXCEPT CLASS A BUS		DIALING) 3 - TALKING ON HANDS-FREE		4 - TEST GIVEN, RESULTS KNOWN			
5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE		9 - DEPLOYMENT UNKNOWN		6 - EXCEPT CLASS A & CLASS B BUS			COMMUNICATION DEVICE		5 - TES	5 - TEST GIVEN, RESULTS UNKNOWN				
17 - THIRD - LEFT SIDE		9 - DEPLOYMENT UNKNOWN 6 - NO VALID OL			7 - EXCEPT TRACTOR-TRAILER 8 - INTERMEDIATE LICENSE			4 - TALKING ON HAND-HELD COMMUNICATION DEVICE						
1 - NOT TRANSPORTED						IONS	:	5 - OTHER ACTIVITY WITH AN ELECTRONIC DEVICE						
2 - EMS	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION OF	EJECTION					- LEARNER'S PERMIT RESTRICTIONS		6 - PASSENGER		ALCOHOL TEST TYPE  1 - NONE			
3 - POLICE 9 - OTHER / UNKNOWN	TRUCK CAB 11 - PASSENGER IN OTHER	1 - NOT EJECTED  2 - PARTIALLY EJECTED		M - MOTORCYCLE				7 - OTHER DISTRACTION INSIDE THE VEHICLE		2 - BLOOD				
3 - OTTEN, ONINOWN	ENCLOSED CARGO AREA	3 - TOTALLY EJECTED	P - PASSENGER				ENT	8 - OTHER DISTRACTIONS OUTSIDE		3 - URI	3 - URINE			
(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)  SAFETY EQUIPMENT		4 - NOT APPLICABLE	N - TANKER	13 - MECHANICAL L				THE VEHICLE 9 - OTHER / UNKNOWN		4 - BRE	4 - BREATH			
12 - PASSENGER IN UNENCLOSED  12 - PASSENGER IN UNENCLOSED				(SPECIAL BRAKES, HAND CONTROLS, OR OTHER						5 - OTHER				
2 - SHOULDER BELT ONLY USED CARGO AREA 3 - LAP BELT ONLY USED 13 - TRAILING UNIT		TRAPPED  1 - NOT TRAPPED	TORCYCLE	E ADAPTIVE DEVICES)  14 - MILITARY VEHICLES ONLY										
4 - SHOULDER & LAP BELT USED	14 - RIDING ON VEHICLE EXTERIOR	2 - EXTRICATED BY		S - SCHOOL BUS T - DOUBLE & TRIPLE TRAILERS		15 - MOTOR VEHICLES				1 - NON	DRUG TEST TYPE 1 - NONE			
5 - CHILD RESTRAINT SYSTEM - FORWARD FACING	(NON-TRAILING UNIT)	MECHANICAL MEANS 3 - FREED BY	X - TANKER / HAZMAT			WITHOUT AIR BRAKES  16 - OUTSIDE MIRROR				2 - BLO	2 - BLOOD			
6 - CHILD RESTRAINT SYSTEM - REAR FACING	15 - NON-MOTORIST 99 - OTHER / UNKNOWN	NON-MECHANICAL MEANS				17 - PROSTHETIC AID		CONDITION  1 - APPARENTLY NORMAL		3 - URIN	3 - URINE			
7 - BOOSTER SEAT						18 - OTHER		2 - PHYSICAL IMPAIRMENT		4 - OTH	4 - OTHER			
8 - HELMET USED 9 - PROTECTIVE PADS USED								3 - EMOTIONAL (E.G. DEI ANGRY, DISTURBED)	PRESSED,		0000	DEAULT/0)		
(ELBOWS, KNEES, ETC.)  10 - REFLECTIVE CLOTHING				GENDER					4 - ILLNESS		DRUG TEST RESULT(S)  1 - AMPHETAMINES			
11 - LIGHTING - PEDESTRIAN				F - FEMALE M - MALE					5 - FELL ASLEEP, FAINTED,		2 - BARBITURATES 3 - BENZODIAZEPINES			
/ BICYCLE ONLY 99 - OTHER / UNKNOWN			U - OTHER/UNKNOWN					FATIGUED, ETC.	NCE OF		IZODIAZEPINES INABINOIDS			
				U- OTHERIONINIUWN					6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUGS		5 - COCAINE			
									/ ALCOHOL  9 - OTHER / UNKNOWN		6 - OPIATES / OPIOIDS 7 - OTHER			
								J JIIZIN JAKNOWN		8 - NEG	GATIVE RESULTS			

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